



## Application Data Sheet

### **Application Information**

Application Number:: 10/721,776  
Filing Date: 11/26/03  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification:: 705  
Suggested Group Art Unit:: 3626  
CD-ROM or CD-R? None  
Title:: System, Method and Article of Manufacture for Providing  
Automated Podiatry-Related Consultation  
Attorney Docket Number:: WRAMC 02-41 05  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 5  
Total Drawing Sheets:: 24  
Small Entity:: No  
Petition Included?:: No  
Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Grigorii  
Middle Name::  
Family Name:: Gadiyak  
City of Residence:: Woodstock  
State or Province of Residence:: Maryland

Country of Residence:: US  
Street of mailing address:: 10720 Enfield Drive  
City of mailing address:: Woodstock  
State or province of mailing address:: Maryland  
Postal or Zip Code of mailing address:: 21163

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Mark  
Middle Name::  
Family Name:: Jacobs  
City of Residence:: Arlington  
State or Province of Residence:: VA  
Country of Residence:: US  
Street of mailing address:: 606 N. Edison Street  
City of mailing address:: Arlington  
State or province of mailing address:: VA  
Postal or Zip Code of mailing address:: 22203

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Shari  
Middle Name::  
Family Name:: Tomasetti  
City of Residence:: Brighton  
State or Province of Residence:: Massachusetts  
Country of Residence:: US  
Street of mailing address:: 12 South Street

City of mailing address:: Brighton  
State or province of mailing address:: Massachusetts  
Postal or Zip Code of mailing address:: 02135

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Daisy  
Middle Name::  
Family Name:: Dewitt  
City of Residence:: Silver Spring  
State or Province of Residence:: Maryland  
Country of Residence:: US  
Street of mailing address:: 12601 Arbor View Court  
City of mailing address:: Silver Spring  
State or province of mailing address:: Maryland  
Postal or Zip Code of mailing address:: 20902

### **Correspondence Information**

Correspondence Customer Number:: 27370

### **Representative Information**

Representative Customer Number::	27370
----------------------------------	-------

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application is	Non-Provisional	60/429,336	11-27-2002